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## DECLARATION AND POWER OF ATTORNEY . FOR PATENT APPLICATION

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s a below named inve	ntor, I n	ereby deciare man	as stated below next 1	to my name;	W 8 1
ly residence/post offic	e addres	s and Citizenship are	as stated below next t nly one name is listed he subject matter whi	below) or an ori	ginal, first and
believe I am the origin pint inventor (if plural atent is sought on the	names a	TIO HELD DESCRIPTION OF W	nly one name is listed he subject matter whi	ch is claimed ar	id for which a
Congestion Control S	ystem_				
		tached bereto unless	the following box is ch	ecked;	
he specification of wi	1011 IS GE	and 2U ac 100	lication No. or PCT Int	ernational Applic	ation
(X) was filed on _		and was amen		(if applicabl	e).
Number <u>10/81</u>			delice assessments of the	- ahove-identifie	d specification,
hereby state that I he ncluding the claims, a disclose all information	nave rev as amend a which i	iewed and understoo ded by any amendme s material to patentab	d the contents of the ent(s) referred to above sility as defined in 37 (	re. I acknowled CFR 1.56.	ge the duty to
		m			:(-) for metant of
I hereby claim foreign prior inventor(s) certificate listed a filing date before that of t	ity benefit	s under Title 35, United 5 I have also identified belov	tates Code Section 119 of v any foreign application for aimed:	any toreign applicat r patent or inventor(	s) certificate having
		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED	UNDER 35 U.S.C. 119
COUNTRY		APPLICATION NOTICE		YES:	NO:
		·		YES:	NO:
Provisional Application I hereby claim the benefit below:	under Title	35, United States Code S	Section 119(e) of any Unite	d States provisional	application(s) listed
DCIO4V.		APPLICATION NUMBER	FILING DATE		
	<b> </b>				
	<del></del>				
U. S. Priority Claim			Section 120 of any United		
manner provided by the first paragraph of True 35, United information as defined in Title 37, Code of Federal Regulation application and the national or PCT international filing date of APPLICATION NUMBER.			this application: STATU\$ (patented/pending/abandoned)		
DOWER OF ATTORNEY					
POWER OF ATTORNEY: As a named inventor, 1 I business in the Patent and	tereby app I Trademar	point the following attorns is Office connected therewi	ey(s) and/or agent(s) to pro ith:	secute this applica	tion and transact all
Custom	er Numbe	er 022879	Place Customer Number Ber Code Label here		
Send Correspondence	to:		Direct Telaph	none Cells To:	
HEWLETT-PACKARD	COMPANY		Salamada II. I	lanan	
Intellectual Property A P.O. Box 272400	dministrati	ion	Wendell J. J		
Fort Collins, Colorado	80527-2	400	650 857 74	63	
made on information with the knowledg	n and b e that v	pelief are believed to willful false statemen ar Section 1001 of Ti	of my own knowledge be true; and further to its and the like so re itle 18 of the United So application or any page	hat these stater nade are punis States Code and	nents were made hable by fine o that such willfu
Full Name of Inventor:	lose Ren	ato Santos	Citizenship:	BR	
Residence:	1824 A	ndrews Avenue San J	lose CA 95124	•	
Post Office Address:	Same a	s Residence			
Ross	. Fari	mode	0	4/28/04	
Town observe Signature	<del></del>		Dam	7	

PAGE 4/5 \* RCVD AT 2/28/2005 4:46:11 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-2/1 \* DNIS:7464060 \* CSID:6508528063 \* DURATION (mm-ss):01-34

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DECLARATION	AND POV	VER OF ATTORNEY ON (continued)	ATTORNEY DOCKET NO.	100201443-2
			attended in the	
Full Name of joint inv	entor:	oshio Turner	Citizenship: US	
Residence:	-	Maple Street, Apt. 2409 Redw	rood City, CA 94063	
	-	Same as Residence		PE
Post Office Address:	Tur		4/29/2004	10,
Inventor's Signature	m	т	Date	2005 "
		·		FEB 2'8 2005
		Gopalakrishnan Janakiraman	Cîtîzenshîp: IN	LE S
Full Name of joint in	ventor:	488 Purisima Ave. Sunnyvale,		TRADEMAN
Residence:				
Post Office Address	·	Same as residence	011.	
	(3)	and	4/28/04	
Inventor's Signatur			Date	
				•
Full Name of joint i	nventor:		Citizenship:	
Residence:		<del></del>		<u> </u>
Post Office Addres	is:			
Inventor's Signatu	TO		Date	
MIACING, Q C.B				
			Citizenship:	
Full Name of joint	Inventor:			
Residence:				
Post Office Addre	  -   35:			
Inventor s Signati	ure		Date	
Full Name of join	t inventor:		Citizenship:	
Residence:				
	:			
Post Office Addr	es6:			
inventor's Signa	ture		Date	
			Citizenship:	
Full Name of job	t inventor:		Olitzenamp.	
Residence:				
Post Office Atid	ress:			
Inventor's Signa	ture		Date	
Full Name of joi	rt inventor:		Citizenship:	
Residence:				
Post Office Add	tress:			
Inventor's Sign	DŽIJEO.		Date	